UNITED STATES DISTRICT COURT FOR THE NORTHERN AND SOUTHERN DISTRICTS OF IOWA

INSTRUCTIONS FOR COMPLETING ATTORNEY BIENNIAL REPORT OF C.L.E FOR THE TWO YEAR PERIOD ENDING DECEMBER 31, 2003

If you were admitted to practice in either the Northern or the Southern District prior to 1982 or during calendar year 1983, 1985, 1987, 1989, 1991, 1993, 1995, 1997, 1999, or 2001, this report must be sent to the Clerk of the U. S. District Court, Southern District, Des Moines, IA. on or before March 1, 2004. (If you are admitted in both districts, the year you were admitted in the district in which you reside determines whether you have a report due this year.) TIME. An attorney admitted to practice in both districts is required to file only one C.L.E. report and pay only one registration fee. C.L.E. record keeping for both districts is done by the Clerk's Office in Des Moines.

*A penalty of \$10.00 is assessed if the report and fee are not received on or before March 1, 2004.

IMPORTANT INFORMATION REGARDING FEES

In an Administrative Order the Judges of the Northern and Southern Districts unanimously adopted a plan to assist with indigent representation. A copy of the order is available from the Clerk of Court. To remain in good standing to practice you must, in addition to filing this C.L.E. report:

- (1) pay a registration fee of \$30.00, and
- (2) either
 - (a) pay an additional assessment of \$20.00, or
 - (b) agree to represent a party in a pro bono case in the next two years.

Please indicate below your choice as to item (2) above:

____Enclosed is my registration fee of \$30.00 and my assessment of \$20.00, for a total of \$50.00.

____Enclosed is my registration fee of \$30.00 only. I agree to take one pro bono case in the next two years..

____Enclosed is my registration fee of \$30.00 only. I am a full-time employee of a government entity and agree to biennially complete five hours of non-litigation projects.

_____Signature

Complete the C.L.E. report on the reverse side. Please make your check payable to "Clerk, U. S. District Court." Send this form and the check to:

Clerk, U.S. District Court P.O. Box 9344

Des Moines, IA 50306-9344

YOU MUST COMPLETE <u>BOTH SIDES</u> OF THIS REPORTING FORM (1)

UNITED STATES DISTRICT COURT FOR THE NORTHERN AND SOUTHERN DISTRICTS OF IOWA

NAME/ADDRESS:		SOCIAL SECURITY NO		
		TELEPHONE NO		
		CHECK IF NAME/	ADDRESS CHANGED	
Attorney's Biennial Repo period ending December		egal Education in the area	of federal practice for the two-year	
Year admitted to Norther	n District:			
Year admitted to Souther	n District:			
*********	*******	*****		
		attended from January 1, 20 practice* every two years is r	002, through December 31, 2003; si required. Number of Hours Actually Attended	
Sponsor of Program	Activity	Date & Place	to Nearest 1/4 Hr.	
<u>-</u>		ocal Rules. You may claim laim activities that deal wit	activities that are obvious such a h trial practice and ethics.	
Total hours attended in a		(NOT TO EXCEED 3)		
Less six (6) hour requirer Hours (NOT TO EXCEED			<u>6</u>	
Northern and Southern D	Districts of Iowa. I	certify to the Court that the a	cal Rules of the U.S. District Cour bove report is true and correct, that at in my opinion these activities mee	
 Date			Signature	

You must complete <u>both sides</u> of this C.L.E. reporting form. Please make your check payable to "Clerk, U.S. District Court." Send this form and check to:

Clerk, U.S. District Court P.O. Box 9344 Des Moines, Iowa 50306-9344